

UNAIDS 2023

GUIDANCE

Frequently Asked Questions

Global AIDS Monitoring 2024

the 1990s, the number of people with diabetes has increased in all industrialized countries. In the Netherlands, the prevalence of diabetes is 6.5% (1.5% of the population aged 15 years and over) (1). The prevalence of diabetes is expected to increase to 10% by the year 2010 (2).

Diabetes is a chronic disease with a high prevalence and a high mortality. The most common complications of diabetes are cardiovascular disease, nephropathy, retinopathy, and neuropathy. The prevalence of these complications is high, especially in the elderly. The prevalence of cardiovascular disease is 30% in people with diabetes (3). The prevalence of nephropathy is 10% in people with diabetes (4). The prevalence of retinopathy is 10% in people with diabetes (5). The prevalence of neuropathy is 10% in people with diabetes (6).

The prevalence of diabetes is increasing in all industrialized countries. In the Netherlands, the prevalence of diabetes is 6.5% (1.5% of the population aged 15 years and over) (1). The prevalence of diabetes is expected to increase to 10% by the year 2010 (2). The prevalence of diabetes is increasing in all industrialized countries. In the Netherlands, the prevalence of diabetes is 6.5% (1.5% of the population aged 15 years and over) (1). The prevalence of diabetes is expected to increase to 10% by the year 2010 (2).

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Global AIDS Monitoring

Purpose of this FAQ

This document provides answers to questions that have been received frequently from national Global AIDS Monitoring rapporteurs, other national counterparts and UN staff. For more information on the Global AIDS Monitoring, please visit our website (<https://www.unaids.org/en/global-aids-monitoring>), or email us at aidsreporting@unaids.org.

General questions

Why is UNAIDS requesting country progress reports in 2024?

In the 2021 high level meeting declaration (para. 71) signatory countries agreed to “...provide to the General Assembly [...] an annual report on progress achieved in realizing the commitments contained in the present declaration...”. Reporting on the implementation of the commitments in 2021 will provide the baseline for assessing achievements against the targets set for 2025. The reported data are utilized for national-level reviews (including the Global Fund applications and similar reprogramming efforts), regional reviews, and global analysis. Data will be reported in UNAIDS, WHO and UNICEF reports in 2024.

What is the deadline for 2024 reporting?

Country data should be submitted online no later than 31 March 2024. Should a submission be received after this date, UNAIDS cannot guarantee that the data will be included in 2024 global reporting.

What are the components of GAM report submissions for 2024?

Countries are encouraged to complete and submit the following GAM components in 2024:

- Data for quantitative indicators, including on financial indicators
- National Commitments and Policy Instrument questionnaire
- WHO/AIDS Medicines and Diagnostics Survey
- Narrative summaries

Countries are encouraged to submit narrative summaries by commitment area. Countries may also share any narrative analysis or reports they may produce for their own national processes.

Countries are encouraged to submit GAM reports even if data are not available for all indicators.

How can I check what my country reported in the last reporting period?

You can view previously reported data in the following ways:

- Through the online reporting tool: after logging into the online reporting tool, select the reporting period for which you want to view data from the drop-down menu;
- By viewing the data reported through the National Commitments and Policy Instrument: <https://lawsandpolicies.unaids.org>
- By viewing the data in the AIDSinfo webpage: <https://aidsinfo.unaids.org/>
- For information on the last report on indicators with regards to AIDS expenditures, please see <https://hivfinancial.unaids.org/hivfinancialdashboards.html> or contact AIDSspending@unaids.org.

What if my country does not have data for an indicator?

For each indicator in the online reporting tool the relevance and data availability for each indicator needs to be entered. If an indicator is relevant but no (new) data are available for the reporting period, select the option “no new data available.”

My most recent data for an indicator with a survey as the recommended source are from two years ago. Should I still report them?

If you had already reported these data in a previous reporting round, then there is no need to re-enter the data this year. However, if you have not reported these data in previous rounds, please enter the data for the current reporting year. Please make sure to change the “Data collection period” to reflect the actual dates of data collection.

Is there an offline template of the data entry sheets available?

Yes, it is under Documents on this page:

<https://www.unaids.org/en/global-aids-monitoring>

New as of 2023 reporting, countries are able to login to the online reporting tool in December to download the data entry template, including a version pre-filled with data for certain elements of reporting. Please see the item below on pre-populated data for more information on which elements will be pre-filled in the template.

Please do note that this offline template is made available as a reference only and cannot be used to automatically upload the collected data into the online reporting tool.

I have already submitted the Global AIDS Monitoring report, however new data have just been made available to me and I would like to update my country submission. Is this still possible?

Please send a message to aidsreporting@unaids.org and request that the indicator/s for which new data have become available be reopened for revision.

Why are subnational data requested for certain indicators?

For selected GAM indicators, countries are invited to also report subnational data, including data at the level of capital cities and other cities of epidemiological importance.

Subnational data can support a better understanding of the HIV epidemic and response to inform programming.

Surveys of key populations are often conducted at the level of sites or subnational areas. Subnational data are extrapolated to generate national values.

Cities play a critical role in achieving the 2025 targets, with more than half of the world's population currently living in cities, and cities accounting for large proportions of national HIV epidemics. The city data will be used to better understand the HIV epidemic and response at local level, to quantify the contribution of cities to national epidemics, and to update city profiles. National GAM rapporteurs are encouraged to involve representatives from key cities throughout the GAM reporting process.

My country has developed subnational estimates using Naomi. Can I use the results to report on subnational data in GAM?

The Naomi model is used to synthesize multiple subnational data sources to generate estimates of key HIV indicators stratified by subnational administrative units, sex and five-year age groups. As of the 2024 GAM reporting round, countries will have the option to select to have subnational data for indicators 2.1, 2.2 and 2.3 taken directly from the final Naomi files. When selected, UNAIDS will directly extract the data for those indicators from the countries final approved a subnational Naomi file.

Does my country's Spectrum estimates file need to be uploaded to the GAM online reporting tool if Spectrum is indicated as the source for selected indicators?

No – as of the 2024 reporting round, countries are no longer asked to upload their Spectrum file to the GAM online reporting tool. Spectrum files are submitted to UNAIDS by national estimates teams through a different process. If a country indicates that data for indicators 1.1, 2.1–2.3, 2.7, 3.1, 3.2, 3.3, 3.4 should be taken from their Spectrum estimate, UNAIDS will directly extract the data for these indicators from that year's final Spectrum file.

Countries that produce a robust Spectrum estimation that meets quality and publication criteria are encouraged to use Spectrum as the source for these indicators. This will promote internal consistency across indicators, as well as alignment in methods, definitions and assumptions for estimated indicators over time and across countries.

How can I share the draft GAM report with various stakeholders for national consultation?

Two options to share draft GAM reports with stakeholders are:

- Provide viewing access to the GAM online reporting tool: stakeholders can submit a request for an account at <https://aidsreportingtool.unaids.org> with the profile of "Country viewer". This will allow them to view data entered without possibility of editing;
- Download an extract from the online reporting tool: Click on "Save all to PDF file" at the top of the "Data entry" screen of the online reporting tool to generate a PDF extract of all the information entered in the online tool for the reporting period.

Summary of changes to GAM indicators for 2024 reporting.

- Four new indicators have been included relating to achieving gender equality, realizing human rights, and eliminating stigma and discrimination:
 - 4.3 Gender-responsiveness of HIV services.
 - 6.8 Discriminatory attitudes towards people living with HIV among health facility staff.
 - 6.9 Discriminatory attitudes towards people from key populations among health facility staff (A–D).
 - 6.10 Discriminatory attitudes towards people from key populations among police (A–D).
- Three new indicators have been included on management of advanced HIV disease and differentiated service delivery:
 - 2.8 Management of cryptococcal infection.
 - 7.15 Coverage of differentiated service delivery antiretroviral therapy models among people living with HIV currently on antiretroviral therapy.
 - 7.16 Viral suppression among people living with HIV engaged in differentiated service delivery antiretroviral therapy models.
- Terminology has been updated throughout the guidelines from “prisoners” to “people in prisons and other closed settings”.
- 1.4 HIV testing among key populations (A–D):
 - The indicator name has been updated to “HIV testing and status awareness among key populations” to better reflect the purpose of this indicator.
- 2.4 Late HIV diagnosis:
 - The indicator name has been updated to “Advanced HIV disease and late HIV diagnosis” to better reflect the purpose of this indicator.
 - A disaggregation by time of CD4 cell count test (at initial diagnosis, at initiation/re-initiation of ART).
 - Data will be requested on the total number of people who received a CD4 test at initial diagnosis and at re-enrolment in care during the reporting period in four categories of CD4 cell count (>200, 200 to <350, 350 to <500, ≥500). This information will support data quality reviews to ensure completeness of the CD4 count data, and the coverage and representativeness of the data.
- 3.1 HIV testing in pregnant women:
 - Countries with a population of more than 250 000 people will now report on this indicator within Spectrum.
- 6.6 Avoidance of health care among key populations because of stigma and discrimination (A–D):
 - This indicator has been modified to refer specifically to avoidance of health-care services in general among people from key populations. The other three sub-items previously included in the indicator definition have been removed for 2024 reporting: avoidance of HIV testing among all respondents who report not having had an HIV test in the past 12 months; avoidance of HIV-specific health care among respondents who indicated they are living with HIV and have not received or have stopped receiving HIV care; and avoidance of HIV treatment among respondents who

indicated they are living with HIV and have never taken or have stopped taking HIV treatment.

- 7.8 People living with HIV with active tuberculosis disease:
 - Terminology has been updated throughout the indicator definition from “active TB disease” to “TB disease”.

- 8.2 Antiretroviral medicines: unit prices and volume:
 - This indicator has been expanded to include other HIV-related regimens beyond antiretroviral medicines.

The NCPI for 2024 reporting is the full questionnaire consisting of Parts A and B. Some new questions have been introduced, some previous questions have been removed, and the wording of some of the questions retained from previous rounds has been further refined. These modifications are based on experiences in previous reporting and to reflect developments in policy recommendations and available technologies.

Online reporting tool

When will the GAM online reporting tool open for data entry?

The 2024 data entry screens will be available in the GAM online reporting tool starting 15 February 2024.

As for the 2023 reporting round, countries will be able to login to the online reporting tool already in December. This will be limited to downloading the data entry template, including a version pre-filled with data for certain items, with the aim of helping with the reporting preparations. Please see the item below on pre-populated data for more information on which items will be pre-filled in the template. It will also be possible to view data reported in previous reporting rounds from the "Data entry" tab. The most recent available reporting period will be 2022 until the tool opens for data entry for the 2023 reporting period in February 2024.

Which internet browser should I use?

The online reporting tool is developed to work best with the latest versions of popular browsers, such as Edge, Chrome, and Firefox. With older browser versions, there may be issues in saving and viewing the data.

What is new in the online reporting tool for 2024?

The user interface for the online reporting tool was updated for the 2023 reporting round to better support country users in completing data entry and more closely reflect the various steps to complete for submission. The process for entering data and submitting reports in 2024 remains the same as in 2023. A webinar will be held in early 2024 to present the online tool.

There is a new GAM rapporteur for the country. How could he/she have access to the online tool?

Please send an email to aidsreporting@unaids.org to inform UNAIDS of the name of the new rapporteur. Please advise if the previous rapporteur's account should be deactivated. The new rapporteur should then register as a country editor on this page: <https://aidsreportingtool.unaids.org/accounts/register/>

A confirmation email will be sent once the registration is verified.

I received an email from aidsreporting-noreply@unaids.org with the subject "GAM Reporting – User registration received for ..." Should I approve?

This is an automatic notification when someone registers as a country viewer. If the person is part of the country team or the stakeholder consultation, you may wish to approve the registration. Otherwise, you may reject the request and inform aidsreporting@unaids.org to block the account.

Are any data pre-populated in the online reporting tool?

Data are pre-populated in the online reporting tool for indicators for which population-based surveys are the recommended source and data are available from Demographic and Health Surveys (DHS) or Multiple Indicator Cluster Surveys (MICS). In order to view these data, after selecting that the indicator is relevant and new data are available, the pre-populated data will be automatically presented in the data entry page for the indicator alongside a notification message confirming the data load. To use the suggested data, click “Save” under the survey. Data can also be modified if needed.

Indicators for which pre-populated data are available in the online tool indicate “Available” in the “Data to load” column on the “Data entry” tab (this is part of the new user interface since 2023). Also, when opening the indicator for which pre-populated data are available, a notification message will be shown in the top section of the data entry page for the indicator, highlighting the possibility to use it.

Data are also pre-filled and available to load for NCPI questions that have remained the same as in previous reporting rounds and for which data were reported by the country. If loading previous responses, please verify whether there have been any changes, and ensure to complete any new questions.

There are yellow boxes around some of the cells in data entry tables. What do these mean?

In the data entry tables for quantitative GAM indicators, these yellow boxes will appear when data pre-populated in the online tool were loaded and changes were then made to the loaded data.

In the NCPI, yellow boxes appear for responses to a question that differ from responses to the same question the previous reporting round.

I want to start entering data but I don't see a Save button. What should I do?

It is possible that you only have viewer access rights. Please ask the national GAM rapporteur to communicate with aidsreporting@unaids.org to have your account changed to have editor rights.

I do not have new data for most of these indicators. Do I still need to enter in each page one by one?

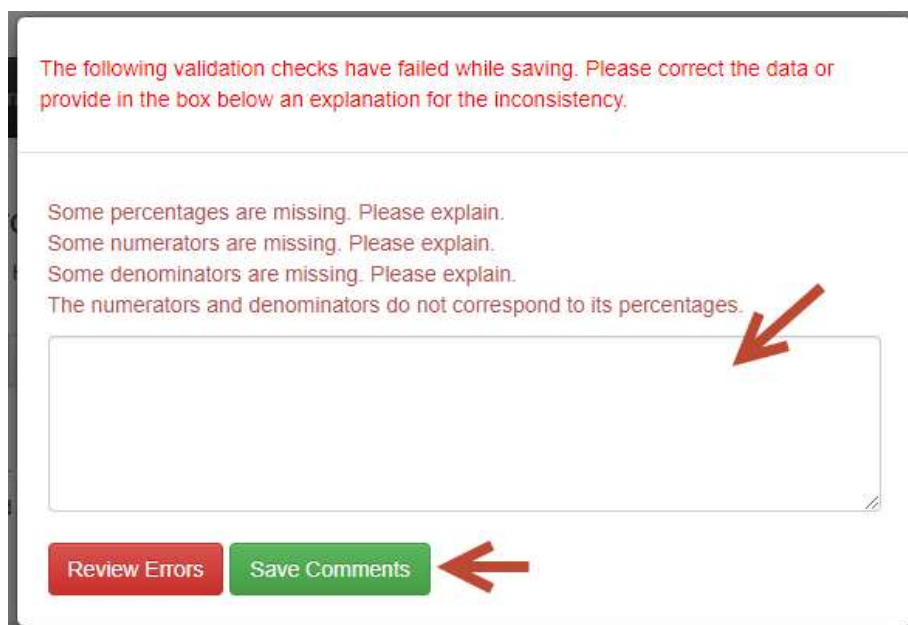
In this case, it is not necessary to enter in each indicator page. You may indicate whether each indicator is relevant and if there are new data available in the corresponding column within the indicator list table in the “Data entry” tab (this is part of the new user interface since 2023).

I am getting a popup window with error messages and am not able to save. I have verified that the data entered are correct. What should I do?

There are data validation messages that appear when the system detects blank textboxes or finds discrepancies in the total compared to disaggregated data. If you want to save the data as is, please enter a reason in the space provided in the popup window, then click “Save Comments”.

The following validation checks have failed while saving. Please correct the data or provide in the box below an explanation for the inconsistency.

Some percentages are missing. Please explain.
Some numerators are missing. Please explain.
Some denominators are missing. Please explain.
The numerators and denominators do not correspond to its percentages.



I'm ready to submit data but the Submit button is not enabled. What should I do?

This means that there are still some indicators without answers.

If the indicator is not relevant in your country's context or if you have no new data to report, you need to specify this in the data entry screen for the indicator or in the column for selecting indicator relevance/data availability in the indicator list table. A warning will also appear in the commitment heading in the indicator list table to indicate the number of indicators without answers. Additionally, each indicator that requires attention has a blank "status" cell and no "download as a pdf file" icon (this is part of the new user interface since 2023).

If there are no indicators in the list but your data entry progress is still not 100%, this means that you have not yet entered data in the AIDS Spending module (Indicators 8.1 to 8.3). You are required to submit data for indicators 8.1, 8.2 and 8.3 in the AIDS Spending module before you can submit in GAM.

You can also check the "Submission" tab for a summarized status of all the components of the GAM report (this is part of the new user interface since 2023).



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